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FIRST NAMED INVENTOR APPLICATION NO FILING DATE ATTORNEY DOCKET NO. CONFIRMATION NO 10/598,457 12/19/2006 Daijiro Nakamura 026280-9004-03 5698

TITLE OF INVENTION: ROTATION OUTPUT DEVICE

	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	¥Æ9 NO	8755 \$1,51	10 \$300	\$0	s1055 \$1,8°	04/12/2010	
	EXAMINER		ART UNIT	CLASS-SUBCLASS				
	HOLMES, JUSTIN		3655	192-223100				
	Address form PTO/SI	ondence address (or Cha B/122) attached. ication (or "Fee Address 12 or more recent) attach	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agento RA, alternatively. (2) the name of a single firm (having as a member a registered attorney or agend) and the names of up to self-time or the patent patent patent patent listed, no name will be printed.		era 2	1 Michael Best & Friedrich LLP 2 3	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) BEENSE NOTIFY It leave an assignment is identified below, no assignment data will appear on the patent. If an assignment is identified below, the document has been filed for								

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. It an recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Techtronic Power Tools Technology Limited Tortola, British Virgin Islands

Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 👹 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

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Corlo M. Cotrone Date ___ April 12, 2010 Authorized Signature Registration No. 48,715 Carlo M. Cotrone Typed or printed name

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